

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	L-O	857	7/18/01
RESPONSE FORMALITY REVIEW	001	825	10/09/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	2	1	10/12/01
2	3	2	10/12/01
3	4	3	10/12/01
4	5	4	10/12/01
5	6	5	10/12/01
6	7	6	10/12/01
7	8	7	10/12/01
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10	11	10	10/12/01
11	12	11	10/12/01
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If more than 150 claims or 10 actions
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BEST AVAILABLE COPY

TCS
10/09/01